

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | N        | 71534  | 02-7-00  |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          |          | 109652 | 04/04/00 |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date        |
|----------------|-------------|
| Final Original | 1 13 7?     |
| Original       | 31 23 11/11 |
| 2              | 02 05 03 04 |
| 3              | ✓           |
| 4              | ✓           |
| 5              | ✓           |
| 6              | ✓           |
| 7              | ✓           |
| 8              | ✓           |
| 9              | ✓           |
| 10             | ✓           |
| 11             | ✓           |
| 12             | ✓           |
| 13             | ✓           |
| 14             | ✓           |
| 15             | ✓           |
| 16             | ✓           |
| 17             | ✓           |
| 18             | =           |
| 19             | =           |
| 20             | =           |
| 21             | =           |
| 22             | =           |
| 23             | =           |
| 24             | =           |
| 25             | ✓           |
| 26             | ✓           |
| 27             | ✓           |
| 28             | -           |
| 29             | -           |
| 30             | -           |
| 31             | -           |
| 32             | -           |
| 33             | -           |
| 34             | -           |
| 35             | -           |
| 36             | -           |
| 37             | ✓           |
| 38             | ✓           |
| 39             | ✓           |
| 40             | ✓           |
| 41             | ✓           |
| 42             | ✓           |
| 43             | ✓           |
| 44             | ✓           |
| 45             | ✓           |
| 46             | ✓           |
| 47             | ✓           |
| 48             | ✓           |
| 49             | ✓           |
| 50             | ✓           |

| Claim          | Date   |
|----------------|--------|
| Final Original | 10 7 8 |
| 28             | 11 11  |
| 51             | ✓      |
| 52             | ✓      |
| 53             | ✓      |
| 54             | ✓      |
| 55             | ✓      |
| 56             | ✓      |
| 57             | ✓      |
| 58             | ✓      |
| 59             | ✓      |
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| 61             | ✓      |
| 62             | ✓      |
| 63             | ✓      |
| 64             | ✓      |
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| 67             | ✓      |
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| 70             | ✓      |
| 71             | ✓      |
| 72             | ✓      |
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| 82             | ✓      |
| 83             | ✓      |
| 84             | ✓      |
| 85             | ✓      |
| 86             | ✓      |
| 87             | ✓      |
| 88             | ✓      |
| 89             | ✓      |
| 90             | ✓      |
| 91             | ✓      |
| 92             | ✓      |
| 93             | ✓      |
| 94             | ✓      |
| 95             | ✓      |
| 96             | ✓      |
| 97             | ✓      |
| 98             | ✓      |
| 99             | ✓      |
| 100            | ✓      |

| Claim          | Date |
|----------------|------|
| Final Original |      |
| 101            |      |
| 102            |      |
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| 149            |      |
| 150            |      |

If more than 150 claims or 10 actions  
staple additional sheet here

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